

**Ryan White Planning Body**  
Serving Anson, Cabarrus, Gaston, Mecklenburg, Union, and York Counties

**Draft Meeting Minutes**

Wednesday, November 14, 2018; 1:00pm-2:00pm  
Hal Marshall Building, Triad Room / 700 N. Tryon St., Charlotte

**Meeting goal**

Develop Directives to present to the full Planning Body for a vote on 1/16/19.

**Attendance**

Shannon Farrar (Chair), Bob Winstead, Sue Goodman, Lamar Gill, Christina Adeleke, James Settles, Dana Reid, Timothy Nixon, Tammeka Evans, LaShondra Patterson, Domonique Brown, Kayla Earley

**Meeting minutes**

***Welcome & Introductions***

The group introduced themselves. Shannon Farrar and Kayla Earley presented the group with vocabulary flashcards for reference of service definitions and common Planning Body terms.

***Directives***

Shannon Farrar presented the group with a draft Directives template developed by Farrar, Kayla Earley, and Jennifer Pepper (Planning CHATT consultant). Christina Adeleke proposed that the group discuss each service category as a group to develop directives for each, as needed.

The group drafted the following Directives, with reasons explained below each.

1. Funded MAI services must be tailored specifically to reducing health disparities for minority populations beyond the typical Part A services.
  - a. Kayla Earley and Domonique Brown reported that some providers charge MAI for services identical to Part A without providing extra steps to better serve people of color. Farrar explained that MAI should go above and beyond to specifically reach minority populations, with the purpose of reducing health disparities. Earley explained that the Planning Body can review the Request for Proposal (RFP) to determine if agencies are being asked to specifically explain their plans to reach minority populations with MAI funds.
2. Funded services should be available during non-traditional hours and in non-traditional settings, including but not limited to satellite offices or through tele-health services.
  - a. Bob Winstead, NC Part B representative, reported that NC Part B has seen evidence of improved health outcomes when consumers are offered non-traditional hours. Winstead also reported that HRSA/HAB is pushing telehealth, which makes services more accessible to people with limited time and/or transportation, especially working people.
3. Fund at least one additional HIPCSA provider, which has demonstrated cultural competence and experience serving PLWH.
  - a. Farrar noted that the one agency currently receiving HIPCSA funding does an amazing job enrolling PLWH in health insurance, but recognized that one person is not enough to meet the need in the TGA. The group agreed that more resources across the TGA's counties are needed to meet this need.
4. Funded Medical Case Management services should be available in all 6 counties.
  - a. The group agreed that consumers in every county should have easy access to medical case managers. Earley noted that having MCM services in each county does not necessarily require adding new providers, but that current MCM providers can foster a system of care

and maximize resources by offering satellite offices in Cabarrus, Union, and Anson counties.

5. Medical Transportation Services should utilize the most cost-effective method of transportation to ensure resources are maximized across the TGA.
  - a. Earley reported that the HRSA site visit report (2019) noted consumer concern over limited transportation. While Part A allocates money into Medical Transportation, Earley noted that this resource can be maximized by utilizing more cost-efficient transportation resources, such as Uber or Lyft. Tammeka Evans reported that some programs contract with [Circulation Health](#), an agency that manages confidentiality paperwork/concerns and partners with agencies like Lyft. Earley to share this information with Ryan White Staff.
6. Funded Mental Health services should be trauma-informed and culturally competent for all populations.
7. Funded Psychosocial Support Services should be trauma-informed and culturally competent for all populations.
  - a. The group agreed that Mental Health and Psychosocial Support Services should be sensitive to the needs of PLWH, especially regarding trauma and cultural competence.

Farrar to present these drafted Directives to the full Planning Body for a vote on 1/16/19.

#### **Next meetings**

Kayla Earley reported that the Ryan White office is moving to 3205 Freedom Dr. Charlotte (Valerie C. Woodard Center) on 1/15/19. Therefore, future meetings will be held at Valerie C. Woodard, beginning 1/16/19.